



19729 - 11 Mile Road, Big Rapids, MI 49307 PH:231-796-8935 FX:231-796-9185

POVERTY GUIDELINES 2024 MECOSTA TOWNSHIP

Size of Family Unit	Poverty Guidelines
1	\$ 15,496
2	\$ 23,664
3	\$ 24,860
4	\$ 30,000
5	\$ 35,140
6	\$ 40,280
7	\$ 45,420
8	\$ 50,560

For each additional person \$5,140

Poverty Exemption2024 Procedures and Guidelines

Hardship exemption shall not be granted to an applicant with cash on hand more than the proposed tax obligation for the ensuing year unless the applicant can show evidence that the cash is subject to legitimate cost of living expense.

Hardship exemption shall not be granted if the total value of the assets of the applicant and each member of the applicant's household exceed \$10,000. Excluding the property for which the exemption is requested and the principal vehicle BUT including all other property, including from all other persons residing in the household. Property shall include, but is not limited to cash, savings, stocks, mutual funds, insurance commodities, coin collections, boats, jewelry, art, motor vehicles, recreations vehicles, second homes, cottages or any other saleable real property or other tangible items.

Below is a checklist of items needed for the local Board of Review to make an accurate decision about your application for a poverty exemption.

Note: Provide proofs for yourself, spouse, and all OTHERS that are living in the home.

☐ Completed application for Poverty Exemption. ☐ Completed Income & Status Sheet for each owner/occupant in the home 18 years or older (attached to application). ☐ Current 2020 State & Federal Income Tax Returns for each owner/occupant in the home 18 years or older. ☐ Most recent 3 months of Bank Statements for each owner/occupant in the home. ☐ Documentation for all income sources including but not limited to credits* claims, Social Security income, child support, alimony income, bridge cards, student loans, scholarships, grants, pension-1099 statements, and all other income sources. ☐ Copy of Driver's License (front & back) or state ID. ☐ Copy of Deed to the home showing ownership. ☐ If applicable, a written explanation of why any person(s) in the home 18 or over are not contributing to the income and expenses of the property. ☐ If applicable, a written explanation of why one's expenses exceed their income, excluding property taxes. ☐ If applicable, most recent home mortgage, second mortgage, equity loan statements. ☐ Unusual & excessive medical bills. ☐ File after January 1, but before the day prior to the last day of the Board of Review.

MCL 211.7u Poverty Exemption Taxpayer Fact Sheet

MCL 211.7u provides for a property tax exemption, in whole or part, for the principal residence of persons who, by reason of poverty, are unable to contribute to the public charges. For purposes of the poverty exemption, the term "principal residence" means how principal residence exemption and qualified agricultural property are defined in MCL 211.7dd. The exemption does not apply to property of a corporation. This Taxpayer Fact Sheet includes updates made to MCL 211.7u by Public Act 253 of 2020.

How To Apply For The Poverty Exemption

To request a poverty exemption, a taxpayer must file:

- 1. Form 5737 Application for MCL 211.7u Poverty Exemption
- 2. Form 5739 Affirmation of Ownership and Occupancy to Remain Exempt by Reason of Poverty
- 3. All required additional documentation (such as federal/state income tax returns)

Forms 5737 and 5739, along with any additional documentation, must be filed with the local assessing unit where the property is located. **Do not file these forms with the Department of Treasury or the State Tax Commission.** The forms may be submitted to the local assessing unit on or after January 1 but before the day prior to the last day of the December Board of Review during the year in which the exemption is requested.

Taxpayers should contact the local assessing unit directly to verify deadline dates for submission of the forms to ensure the application gets reviewed by a Board of Review during that calendar year.

In addition to filing Forms 5737 and 5739 and any supporting documentation, a taxpayer must do all the following to be eligible for the poverty exemption:

- 1. Own and occupy the property as a principal residence.
- 2. Provide federal and state income tax returns for the current or immediately preceding year, including any property tax credits, for all persons <u>residing in the principal residence</u> (disclosure of the income of an owner who is not residing in the principal residence is not required). Federal and state income tax returns are not required for a person residing in the principal residence if that person was not required to file a federal or state income tax return. Instead, Form 4988, *Poverty Exemption Affidavit* may be filed for all persons residing in the residence who were not required to file federal or state income tax returns in the current or immediately preceding year.

Affirmation of Ownership and Occupancy to Remain Exempt by Reason of Poverty

This form is issued under the authority of Public Act 253 of 2020,

This form is to be used to affirm ownership, occupancy, and income status. MCL 211.7u(2) provides that, to be eligible for exemption under this section, a person shall, subject to subsection (6) and (8), annually affirm that the applicant owns and occupies, as a principal residence, the property for which an exemption is requested.

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PART 1: OWNER INFORMATION — Enter information for	the person owning ar	····		ence.		
Owner Name		Owner Telephone	Number			
Mailing Address	City		State	ZIP Code		
PART 2: LEGAL DESIGNEE INFORMATION (Complete in	applicable.)		1			
Legal Designee Name		Daytime Telephon	e Number			
Mailing Address	City		State	Z(P Code		
PART 3: HOMESTEAD PROPERTY INFORMATION E	nter information for prope	erty in which the	exempti	ion is being claimed.		
City or Township (check the appropriate box and enter name) City Township Village		County				
Name of Local School District						
Parcel Identification Number	Year(s) Exemption Previously	Granted by Board	of Review			
Homestead Property Address	City		State	ZIP Code		
PART 4: AFFIRMATION OF OWNERSHIP, OCCUPANCY	AND INCOME STAT	US (Check all	boxes t	hat apply.)		
 I own the property in which the exemption is being claimed. The property in which the exemption is being claimed is used as my homestead. Homestead is generally defined as any dwelling with its land and buildings where a family makes its home. After establishing initial eligibility for the exemption, my income and asset status has remained unchanged and/or I receive a fixed income solely from public assistance that is not subject to significant annual increases beyond the rate of inflation, such as federal Supplemental Security Income or Social Security disability or retirement benefits. 						
PART 5: CERTIFICATION						
I hereby certify to the best of my knowledge that the information provided on this form is true and I am eligible to receive an exemption from property taxes by reason of poverty pursuant to Michigan Compiled Law, Section 211.7u.						
Owner or Legal Designee Name (print) Signature of 6	Owner or Legal Designee		Da	ate		
Designee must attach a letter of authority.						
LOCAL GOVERNMENT USE ONLY	(DO NOT WRITE BE	LOWTHISL	NE)			
Approved Denied (Attach appeal instructions and p	rovide to owner.)	Tax Year(s) exe	mption wil	l be posted to tax roll		
CERTIFICATION — I certify that, to the best of my know accurate.	ledge, the information	contained in	this forn	n is complete and		
Assessor Signature		Date Certified by A	Assessor			

Poverty Exemption Affidavit

This form is issued under authority of Public Act 206 of 1893; MCL 211.7u.

INSTRUCTIONS: When completed, this document must accompany a taxpayer's Application for Poverty Exemption filed with the supervisor or the board of review of the local unit where the property is located. MCL 211.7u provides for a whole or partial property tax exemption on the principal residence of an owner of the property by reason of poverty and the inability to contribute toward the public charges. MCL 211.7u(2)(b) requires proof of eligibility for the exemption be provided to the board of review by supplying copies of federal and state income tax returns for all persons residing in the principal residence, including property tax credit returns, or by filing an affidavit for all persons residing in the residence who were not required to file federal or state income tax returns for the current or preceding tax year.

I,	, swear and affirm by my signature below that I
reside in the principal residence that is the si	ubject of this Application for Poverty Exemption and that
for the current tax year and the preceding tax	year, I was not required to file a federal or state income
tax return.	
Address of Principal Residence:	
Signature of Person Making	Affidavit Date

Application for MCL 211.7u Poverty Exemption

This form is issued under the authority of the General Property Tax Act, Public Act 206 of 1893, MCL 211.7u.

MCL 211.7u of the General Property Tax Act, Public Act 206 of 1893, provides a property tax exemption for the principal residence of persons who, by reason of poverty, are unable to contribute toward the public charges. This application is to be used to apply for the exemption and must be filed with the Board of Review where the property is located. This application may be submitted to the city or township the property is located in each year on or after January 1.

To be considered complete, this application must: 1) be completed in its entirety, 2) include information regarding all members residing within the household, and 3) include all required documentation as listed within the application. Please write legibly and attach additional pages as necessary.

PAR	T 1: PERSONAL INFOR	- NOITAMS	– Petitioner must li	st all required persona	al informatio	n.		
Petitio	ner's Name				Daytime Phone	Number		
Age of	Petitioner	ioner Marital Status Age of Spouse			Number of Legal Dependents			
Proper	ty Address of Principal Residence			City		State	ZIP Code	
Check if applied for Homestead Property Tax Credit			Amount of Homestead Property Tax Credit					
PAR	T 2: REAL ESTATE INF	ORMATIO	N					
	the real estate information ence of ownership of the				to provide a	deed, lan	d contract or other	
Proper	ly Parcel Code Number			Name of Mortgage Company				
Unpaid	Balance Owed on Principal Resid	ence	Monthly Payment	L	Longth of Time	at this Reside	nce	
Proper	Property Description							
PAR	T 3: ADDITIONAL PRO	PERTY INF	ORMATION					

List information related to any other property owned by you or any member residing in the household.								
Check if you own, or are buying, other property. If checked, complete the information below.				Amount of Income Earned from other Property				
	Property Address			City		State	ZIP Code	
1					,			
'	Name of Owner(s)			Assessed Value	Date of Last Ta	xes Paid	Amount of Taxes Paid	
	Property Address			City		State	ZIP Code	
2	Name of Owner(s)			Assessed Value	Date of Last Ta	xes Paid	Amount of Taxes Paid	

PART 4: EMPLOYMENT	INFORMAT	TION — List your o	urrent emplo	yment info	rmation.		
Name of Employer				-			
Address of Employer			City			State	ZIP Code
, , , , , , , , , , , , , , , , , , ,						1	
Contact Person			Employer Te	lephone Numb	er		
PART 5: INCOME SOUR	CES						
List all income sources, in accounts), unemployment judgments from lawsuits, income, for all persons re	t compensa alimony, ch	tion, disability, gov nild support, friend	ernment pens	sions, work	er's compensa	tion, divi	dends, claims and
	Source	e of Income			Month	ly or An (indicate	nual (ncome which)
PART 6: CHECKING, SA	VINGS AND	INVESTMENT IN	NFORMATIO!	N			
List any and all savings owned by all household members, including but not limited to: checking accounts, savings accounts, postal savings, credit union shares, certificates of deposit, cash, stocks, bonds, or similar investments, for all persons residing at the property.							accounts, savings nvestments, for all
Name of Financial Ins or Investments	I	Amount on Deposit	Current Interest Rate	e Na	ıme on Accou	nt	Value of Investment
PART 7: LIFE INSURANC	E — List al	Il policies held by a	all household	members.			
Name of Insured	Amount Policy		Monthly Policy Paid in		ame of Beneficiary		Relationship to Insured
4. b. 4.4., , , , , , , , , , , , , , , , ,							
PART 8: MOTOR VEHICL	E INFORM	ATION		l			
All motor vehicles (includ within the household must	ing motorcy t be listed.	ycles, motor home	es, camper tr	ailers, etc.) held or owne	d by an	y person residing
Make		Year		Monthh	/ Payment	p.	alance Owed
maro		1681		- HOIRIN	y a dyntecht.	100	nunce Oweu

PART 9: HOUSEHOLD OCCUPANTS — List all persons living in the household.								
First and Last Name		Age		Relationship to Applicant F		Place of Employment		\$ Contribution to Family Income
						7,000		
PART 10: PERSONAL DE	BT — List al	personal d	ebt for a	all hou	usehold membe	ers.		
			Dat					
Creditor	Purpose	of Debt	of De	ebt	Original Bala	nce Mon	thly Payment	Balance Owed
						100000		
		:						
	W							
PART 11: MONTHLY EXPENSE INFORMATION								
The amount of monthly expenses related to the principal residence for each category must be listed. Indicate N/A as necessary.								
Heating	Electric	tric Water					Phone	
Cable	Food	od			Clothing		Health Insurance	
Garbage	<u> </u>	Daycare				Car Exper	nse (gas, repair, etc.)
Olhar (tune and amount)		Othor/use se	d americal					
Other (type and amount) Other (type and amount)					Other (type and amount)			
Other (type and amount) Other (type and amount)					Other (typ	e and amount)		

NOTICE: Per MCL 211.7u(2)(b), federal and state income tax returns for all persons residing in the principal residence, including any property tax credit returns, filed in the immediately preceding year or in the current year must be submitted with this application. Federal and state income tax returns are not required for a person residing in the principal residence if that person was not required to file a federal or state income tax return in the tax year in which the exemption under this section is claimed or in the immediately preceding tax year.

PART 11: POLICY AND GUIDE	LINES ACKNOWLEDGMENT	
used for the granting of exemption the federal poverty guidelines pure of Health and Human Services to adopted by the governing body eligibility requirements less that the specific income and asset less	ons under MCL 211.7u. In order to be eligith blished in the prior calendar year in the Fed under its authority to revise the poverty line of the local assessing unit so long as the nothe federal guidelines. The policy and guither of the federal guidelines.	evailable to the public the policy and guidelines on the exemption, the applicant must meet leral Register by the United States Department under 42 USC 9902, or alternative guidelines alternative guidelines do not provide income uidelines must include, but are not limited to, acome and assets. The combined assets of all the local assessing unit.
The applicant has reviewe specific income and asset I	d the applicable policy and guidelines ac evels of the claimant and total household i	dopted by the city or township, including the income and assets.
PART 12: CERTIFICATION		
	knowledge that the information provided i roperty taxes pursuant to Michigan Compi	n this form is complete, accurate and I am led Law, Section 211.7u.
Printed Name	Signature	Date
This application shall be filed a Board of Review.	fter January 1, but before the day prior	to the last day of the local unit's December

Decision of the March Board of Review may be appealed by petition to the Michigan Tax Tribunal by July 31 of the current year. A July or December Board of Review decision may be appealed to the Michigan Tax Tribunal by petition within 35 days of decision. A copy of the Board of Review decision must be included with the petition.

Michigan Tax Tribunal PO Box 30232 Lansing MI 48909

Phone: 517-335-9760

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